



Medical Alert Procedure

Effective: 7 July 2016

1. Guiding Principles

This procedure details the requirements for clinical staff (doctor/nurse/midwife/pharmacist) to ensure correct and complete reporting, notification and documentation of medical alerts (adverse drug reactions, anaesthetic alerts and medical alerts).

It also details the integration between the clinical process and the Health Information Management (HIM) processes that are to occur within WA Country Health Service - South West (WACHS-SW), including the review of alerts by designated relevant responsible officers.

The principles of this procedure are based on the Department of Health [WA Clinical Alert \(Med Alert\) Policy Operational Directive OD 0511/14](#).

A medical alert can be identified either on questioning of a patient or through the occurrence of an adverse event or diagnosis during a patients admission.

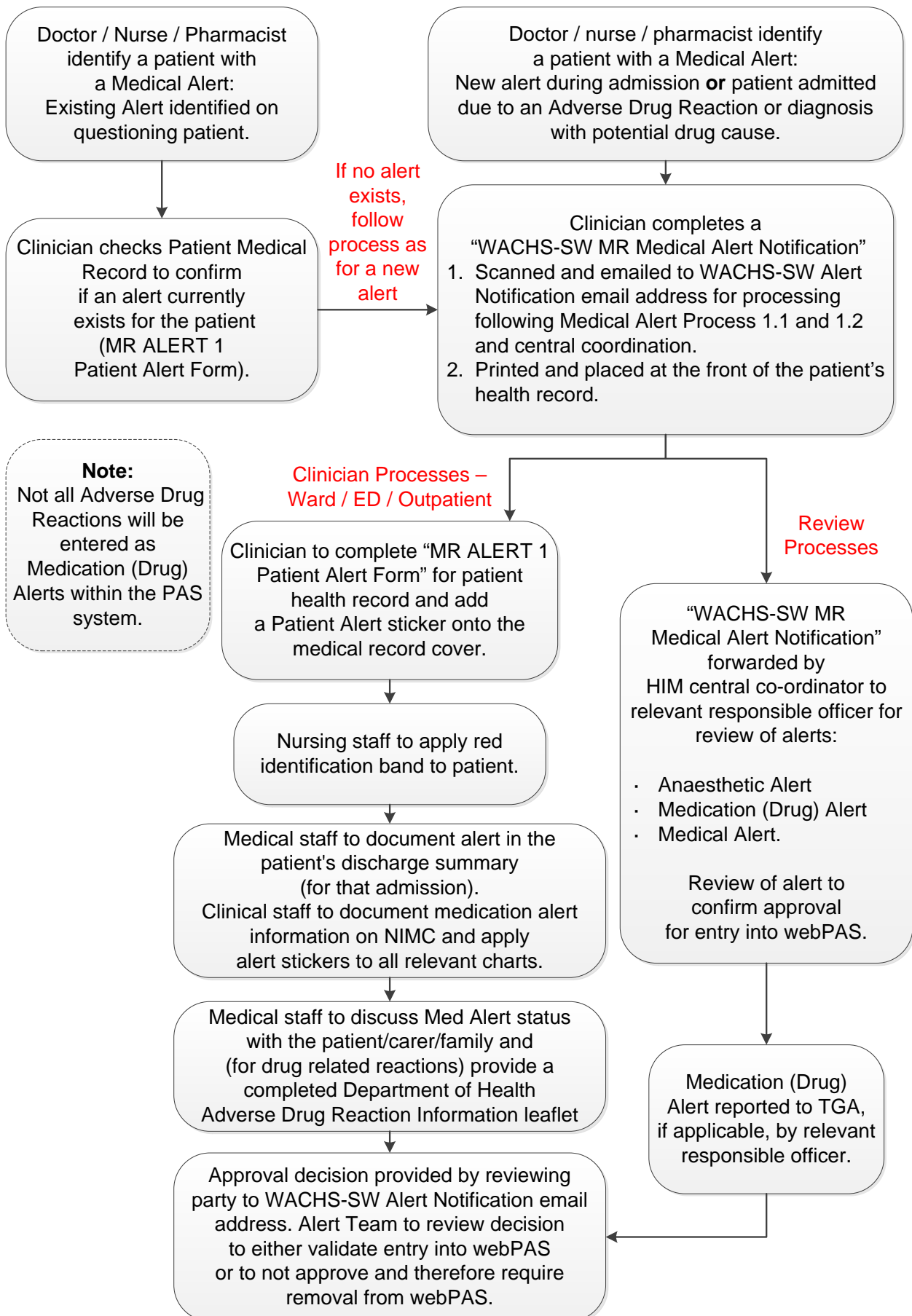
Medical alerts that are included in the patient webPAS data may be classified as an Anaesthetic, Medical or Medication (Drug) Alert as per the criteria below.

Anaesthetic Alert Category	Medical Alert Category	Medication (Drug) Alert Category
<ul style="list-style-type: none"> • Difficult intubation • Anaesthetic drug reaction • Malignant hyperthermia • Sleep apnoea. 	<ul style="list-style-type: none"> • Heart valve replacement • Implanted devices • Streptokinase therapy • Bleeding disorders • Sickle cell anaemia • Hypopituitary • Addisons • Porphyria • Neuroleptic Malignant Syndrome • G6PD Deficiency • Thalassaemia • Severe epilepsy • Myasthenia Gravis • Munchausens • Difficult X-Match • Organ Transplant • Other life threatening medical conditions. 	<p>Allergic Reaction such as:</p> <ul style="list-style-type: none"> • Serious or severe rash • Rash with whole body swelling • Anaphylaxis • Serum Sickness • Angioedema • Bronchospasm. <p>Serious or life threatening reactions such as:</p> <ul style="list-style-type: none"> • Agranulocytosis • Extrapramidal side effects to antipsychotics • Stevens Johnson Syndrome • Toxic epidermal necrolysis • Malignant hyperthermia • Scoline apnea or cholinesterase problem • Neuroleptic Malignant Syndrome • Hepatitis • Nephritis. <p>Other serious, life threatening reaction:</p> <ul style="list-style-type: none"> • Lifelong warfarin • Lifelong anticoagulation • Chronic corticosteroids.

All Medication (Drug) Adverse Reactions / Effects are to be recorded on the patients medication chart and within the patients integrated notes.

Not all Medication (Drug) Adverse Reactions / Effects will be included as an alert in the webPAS system.

2. Process Flowchart



3. Definitions

<p>Medical Alert (Med Alert) / Clinical Alert</p>	<p>A diagnosis which has the potential to be of critical importance to a patient’s management during the first 24 hours of their admission to hospital and assumes that the patient is not always capable of communicating such information. Classified as; anaesthetic, medical and medication alerts.</p>
<p>Medication (Drug) Adverse Reaction</p>	<p>A harmful or unpleasant reaction resulting from the use of a medication at doses normally used for the prophylaxis, diagnosis or treatment of disease. May be serious or unexpected; allergic or non-allergic.</p>
<p>Medication Side Effect</p>	<p>An effect of a medication that is secondary to the one intended. May be well known and due to the activity of the medication in the body. For example – hair loss for many cancer treatments.</p>
<p>Relevant Responsible Officer</p>	<p>The nominated staff to undertake review of Med Alert notifications for WACHS-SW in the relevant category for authorisation of entry into webPAS and any additional reporting as required.</p> <ul style="list-style-type: none"> · Anaesthetic Alert [All SW patients] – Bunbury Hospital Head of Department Anaesthesia. · Medication (Drug) Alert [All SW patients] – Chief Pharmacist · Medical Alert [Bunbury Hospital patients] – Bunbury Hospital Medical Administrator · Medical Alert [District site patients] – Regional Medical Director

4. Roles and Responsibilities

Clinical Staff

Clinical staff (doctor/nurse/midwife/pharmacist) are responsible for the appropriate reporting of Med Alerts as described in this procedure, the completion and forwarding of the associated documentation, ongoing patient management and communication of the Med Alert to the patient.

Health Information Management (HIM) Staff

HIM staff are responsible for coordinating the entry of reported Med Alerts into webPAS, the distribution of the WACHS-SW MR Medical Alert Notification to the relevant responsible officer for review, follow up of outstanding reviews and the removal of non-approved Med Alerts from webPAS as directed by the relevant responsible officer.

Relevant Responsible Officer

The relevant responsible office is responsible for ensuring timely review of WACHS-SW MR Medical Alert Notification forms and response to the HIM team on the approval or non-approval of the entry into webPAS. They are also responsible for any addition reporting to statutory bodies that may be required as a consequence of the alert, for example Therapeutics Advisory Group.

All Staff

All staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

5. Compliance

It is a requirement of the WA Health Code of Conduct that employees “comply with all state government policies, standards and Australian laws and understand and comply with all WA Health business, administration and operational directives and policies”. Failure to comply may constitute suspected misconduct under the [WA Health Misconduct and Discipline Policy](#).

6. Evaluation

Monitoring of compliance with this document is to be carried out by Health Information Management every 12 months.

7. Standards

[National Safety and Quality Health Care Standards](#): 1.2.2, 1.8.1, 4.7.1, 4.7.2, 4.7.3

8. Appendix

Appendix 1 [Clinician Summary](#)

9. Related Policies

Department of Health [Operational Directive OD 0511/14 WA Clinical Alert \(Med Alert\) Policy](#)

Department of Health [Operational Directive OD 0486/14 WA Health Patient Identification Policy](#)

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Appendix 1 Clinician Summary

This process details the requirements for clinical staff (doctor / nurse / midwife / pharmacist) to ensure correct and complete reporting of Medical Alerts (adverse drug reactions, anaesthetic alerts and medical alerts).

A Medical Alert can be identified either on questioning of a patient or through the occurrence of an adverse event or diagnosis during a patients admission.

- Medical Alert: Existing Alert identified on questioning patient. Checks Patient Medical Record to confirm if an alert currently exists for the patient (Allergy / Sensitivity Label and Patient Alert Form). If alert is recorded no further action required.
- Medical Alert: New alert during admission OR patient admitted due to an Adverse Drug Reaction or diagnosis with potential drug cause.
- Complete a 'WACHS-SW MR Medical Alert Notification Form'
 - Scan and email to WACHS-SW Alert Notification email address. Place printed copy at the front of the patient's health record
- Complete a 'MR ALERT 1 Patient Alert Form' for patient health record and add a Patient Alert sticker to the medical record cover.
- Nursing staff apply red identification band to patient.
- Medical staff document alert in the patients discharge summary (for that admission).
- Document medication alert information on NIMC and add alert stickers to all relevant charts.
- Medical staff to discuss Med Alert status with the patient / carer / family and (for drug related reactions) provide a completed Department of Health Adverse Drug Reaction Information leaflet.

The form is titled 'WACHS-SW MR Medical Alert Notification Form' and includes fields for patient name, hospital, and medical alert type. It contains a section for 'PATIENT INFORMATION USE ONLY' with checkboxes for various alert categories and a signature line for the reporting clinician.

The form is titled 'MR ALERT 1 Patient Alert Form' and features a table with three rows for recording alerts. Each row has columns for 'ALERT STICKER' (containing the number 1, 2, or 3) and 'DESCRIPTION'. It also includes a 'GUIDELINES' section and a signature line.



All forms are available via the Publications Register Database (PRD) on the Patient Information Activity Reporting System (PIARS) on the intranet.